

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY  
COMPANY  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 DEC -7 AM 11:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L0000000 5720

1. Limited Liability Company's Name

TICELU, LLC

2. Principal Office Address

15317 LOCH ISLE DR., W

Suite, Apt. #, etc.

City & State

MIAMI LAKES, FL

Zip

33014

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

FL

Zip

Country

4. State/Country of Formation

FL

5. Date Organized or Qualified  
To Do Business in Florida

6. FEI Number

☒ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

**\$3.00 Additional Fee required  
for a Certificate of Status**

**8. Name and Address of Current Registered Agent**

Name

PAULA YUH-LING LIU

100004724791--0

Street Address (P.O. Box Number is Not Acceptable)

15317 LOCH ISLE DR., W

Suite, Apt. #, Etc.

City

MIAMI LAKES

State

FL

Zip Code

33014

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of  
Registered Agent

[Signature]

Date 11/15/2001

REGISTERED AGENT MUST SIGN

**10. Names and Street Addresses of Managing Members/Managers**

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
PRES	PAULA YUH-LING LIU	15317 LOCH ISLE DR. W	MIAMI LAKES, FL 33014

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of  
Managing Member/Manager

[Signature]

Date

11/15/2001

Daytime Phone #

(305) 362-8050

Typed or printed name of signing Managing Member/Manager

PAULA YUH-LING LIU

CR2E041 (9/01)